

# EXHIBIT B

Date: 3/2/2009 Time: 12:00 PM To: 12124227541 @ 912124227541

Frank 2/3

RONASH

<b>ACORD<sup>TM</sup> PROPERTY LOSS NOTICE</b>		63148		DATE 03/02/09	
PRODUCER PHONE (A/C, No, Ext): 212 344-2444		MISCELLANEOUS INFO (Site & location code)		DATE OF LOSS AND TIME 02/28/09	
Frank Crystal & Co., Inc. Financial Square 32 Old Slip New York, NY 10005		POLICY TYPE		COMPANY AND POLICY NUMBER	
CODE: 28700		FLOOD		NAID CODE	
AGENCY CUSTOMER ID		WIND		POLICY DATES	
				EFF: 04/29/08 EXP: 04/29/09	

INSURED		CONTACT		CONTACT INSURED	
NAME AND ADDRESS OF INSURED Ronald B. Shipka, Enterprise Meryl Lachman - Assoc. Rolling Meadows, IL 60008		DATE OF BIRTH		NAME AND ADDRESS OF INSURED Pasquale Guerra 773-617-7224 Maek Musick - Public Adjuster 773-407-9500	
RESIDENCE PHONE (A/C, No)		BUSINESS PHONE (A/C, No, Ext)			
NAME AND ADDRESS OF SPOUSE (IF APPLICABLE)		DATE OF BIRTH		RESIDENCE PHONE (A/C, No)	
		SOC SEC # OR FEIN:		WHERE TO CONTACT	
				WHEN TO CONTACT	

LOSS		POLICE OR FIRE DEPT TO WHICH REPORTED	
LOCATION OF LOSS 1301 Fletcher, Chicago, IL 60657			
KIND OF LOSS	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> LIGHTNING	<input type="checkbox"/> FLOOD
	<input type="checkbox"/> THEFT	<input type="checkbox"/> HAIL	<input type="checkbox"/> WIND
DESCRIPTION OF LOSS & DAMAGE (Use separate sheet, if necessary)		PROBABLE AMOUNT ENTIRE LOSS	
The insured reports that a vehicle allegedly caught fire in the garage as (See Attached Desc. of Loss & Damage Information.)			

POLICY INFORMATION					
MORTGAGEE					
NO MORTGAGEE					
HOMEOWNER POLICIES SECTION 1 ONLY (Complete for coverages A, B, C, D & additional coverages. For Homeowners Section II Liability Losses, use ACORD 3.)					
A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	DEDUCTIBLES	DESCRIBE ADDITIONAL COVERAGES PROVIDED
					9CCN001 3/6/09
COVERAGE A. EXCLUDES WIND					
SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)					
FIRE, ALLIED LINES & MULTI-PERIL POLICIES (Complete only those items involved in loss)					
ITEM	SUBJECT OF INSURANCE	AMOUNT	% COINS	DEDUCTIBLE	COVERAGE AND/OR DESCRIPTION OF PROPERTY INSURED
	BLDG <input type="checkbox"/> CNTR	10,305,402		1,000	
	BLDG <input type="checkbox"/> CNTR	1,399,142			Rents
	BLDG <input type="checkbox"/> CNTR				
SUBJECT TO FORMS (Insert form numbers and edition dates, special deductibles)					
FLOOD POLICY	BUILDING	DEDUCTIBLE	ZONE	PRE FIRM	DIFF IN ELEV
	CONTENTS	DEDUCTIBLE		POST FIRM	FORM TYPE
WIND POLICY	BUILDING	DEDUCTIBLE	ZONE	GENERAL	CONDO
	CONTENTS			DWELLING	
REMARKS: OTHER INSURANCE (List companies, policy numbers, coverages & policy amounts) NY ONLY: PREVIOUS ADDRESS OF INSURED & WIFE'S MAIDEN NAME					
CAT #	FICO #	ADJUSTER ASSIGNED	ADJUSTER #		DATE ASSIGNED
REPORTED BY Insured	REPORTED TO Donald Knoll	SIGNATURE OF INSURED		SIGNATURE OF PRODUCER	